## **Editorial briefing**

## Further call for PPI expertise in HEX

Welcome to this edition of HEX. I will begin by referring readers back to issue 17.6 where the Editorial team advised that we wished to include PPI expertise on the Editorial Board and asked anyone who might be interested to contact the team for further discussion. This invitation is still open and would like to ask readers to encourage the PPI members or groups they work with to put themselves forward.

We also wish to encourage short reports from Service User, Research User or Patient and Public Involvement (PPI) groups describing innovative ways in which patient and public involvement either has been researched or has impacted on health care, policy or research. Again, please support the PPI groups you work with to submit such reports.

The importance of PPI in research is emphasized by the publication, in March 2015, of 'Going the Extra Mile: Improving the nation's health and wellbeing through public involvement in research', a report of the 'Breaking Boundaries' strategic review of public involvement in the National Institute of Health Research (NIHR). The strategic goals for 2025 include the following:

- 1. Opportunities to engage and become involved in research are visible and seized by the public.
- The experience of patients, service users and carers is a fundamental and valued source of knowledge.
- **3.** Public involvement is locally driven and relevant.

**4.** Evidence of what works is accessible so that others can put it into practice.

We are hoping that our call for PPI involvement in HEX supports the first strategic goal.

The source of knowledge that patients, service users and carers bring, in all arenas, is not always appreciated. In this issue, Brad Wright's analysis of 4 years of data on health centre governing boards indicates that representative patient trustees are significantly less likely than other trustees to hold a position on the executive committee or serve as board chair. His findings also have important implications for other settings where engaging with and empowering patients to contribute is sought.

Maria Grandahl's study illustrates the importance of investigating and reporting the experiences of patients and service users. The results of her team's study, exploring immigrant women's views of cervical screening and HPV screening, showed that participants were positive about the health measures, but expressed difficulties in understanding information from health-care providers. The need for clinicians and public health specialists to be cognizant of the role played by health literacy is demonstrated by this work.

Charlotte Wilson's research team's work demonstrates the importance of comparing and contrasting perspectives of patients and clinicians, which can contribute to changes in clinical practice.

The need for public involvement in commissioning decisions and clinical care to be locally driven seems obvious and is demonstrated by Zoe Hildon's paper. Robin Hayeems' work describes how exploring views of potential service users has implications for national healthcare policy. Ensuring that research questions are understandable and relevant to the people who give up their time to support researchers is key to PPI.

Journals such as HEX play a key role in ensuring that research evidence is made available, to influence guideline development, clinical practice, commissioning decisions and both local and national policy. Whilst 'Evidence of what works' is often taken to mean randomized controlled trials (RCTs), the value of research using qualitative methods and process evaluations within trials is increasingly recognized.2 We would value the submission of manuscripts which explain trial results, emphasizing the patient participant perspective of the myriad of complex interventions that academics are developing.

We hope you will agree that this issue of HEX draws together manuscripts which all

emphasize involving patients in health-care delivery, commissioning and research.

## Carolyn Chew-Graham\*†

\*Professor of General Practice Research, Research Institute, Primary Care and Health Sciences, Keele University, Staffordshire, UK and †Honorary Professor of Primary Care Mental Health, South Staffordshire and Shropshire Healthcare NHS Foundation Trust, Staffordshire, UK

## References

- 1 Going the Extra Mile: improving the nation's health and wellbeing through public involvement in research. Available at: http://www.nihr.ac.uk/getinvolved/Extra%20Mile2.pdf, accessed 11 April 2015.
- 2 Process evaluation of complex interventions. UK Medical Research Council (MRC) guidance. Available at: http://www.ioe.ac.uk/ MRC PHSRN Process evaluation guidance final (2).pdf, accessed 11 April 2015.